PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

CM2601MC

		CLAIMS A	S FILED		SMALL ENTITY			OTHER THAN				
 	<u>:</u>		(Column 1)		(Column 2)			TYPE		OR	OR SMALL ENTITY	
TOTAL CLAIMS			20					RATE	FEE	7	RATE	FEE
F	OR		NUMBER	FILED	NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	
TO	OTAL CHARGE	ABLE CLAIMS	20 mi	nus 20=	. 9			X\$ 9=		OR	X\$18=	
INI	DEPENDENT C	CLAIMS	2 m	inus 3 =	. 8			X43=		OR	X86=	
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=	1	OR	+290=	
* 11	the difference	e in column 1 is	less than z	ero, enter	"0" in ()" in column 2		TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II								. 0 17 12			OTHER	THAN
_		(Column 1)		(Colum	າກ 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent +		Minus	***			ſ	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
							L	TOTAL DDIT. FEE		╏╗╏	TOTAL	
(Column 1) (Column 2) (Column 3)									<u> </u>]0,, ,	ADDIT. FEE	
8		CLAIMS		HIGHE	ST		Г		ADDI-	1 [ADDI-
		REMAINING AFTER AMENDMENT		PREVIOUS PAID FO	JSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
AMENDMENT	Total	*	Minus	**		= :		X\$ 9=		OR	X\$18=	FEE.
	Independent	*	Minus	***		=	-	X43=		l t	X86=	· ·
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							743-		OR	△ 00=	
								+145=		OR	+290=	
				AE	TOTAL DDIT. FEE	•	OR A	TOTAL DDIT. FEE				
		٠.				·.						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		= '	+	V40	>	-		-
	TRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	X43=		OR	X86=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
11	If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DIT. FEE	
T	ne *Highest Numl	ber Previously Paid	For" (Total or	Independent) is the h	3, enter 3.* highest number (DIT. FEE L in the appr	opriate box			